

MULTIPLE DEPENDENT LAIM FEE CALCULATION SHEET

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
2						
3						
4		3				
5		3				
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37	1					
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49						
50						
TOTAL IND.	←		←		←	
TOTAL DEP.						
TOTAL CLAIMS						

	IND	DEP	IND	DEP	IND	DEP
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100						
TOTAL IND.	←		←		←	
TOTAL DEP.						
TOTAL CLAIMS						